

SOUTHWEST AREA AIRCRAFT FLIGHT FOLLOWING REQUEST

INITIAL REQUEST INFORMATION			ORIGINATING OFFICE #			COST MANAGEMENT CODE			TYPE A/C - FW or RW					
DATE/TIME		TO/FROM								FAA "N" Number				
				INCIDENT #		INCIDENT NAME		RESOURCE #						
MISSION DESCRIPTION - CHECK or CIRCLE ONE										CALL SIGN				
MOBILIZATION			DEMOBILIZATION			ADMINISTRATION			SES					
NAME/TYPE OF CARGO		LBS	RESOURCE ORDER # OR ADMIN TRAVEL AUTH#		NAME/TYPE OF CARGO		LBS	RESOURCE ORDER # OR ADMIN TRAVEL AUTH#		MAKE MODEL				
										COLOR				
										PAX SEATS				
										VENDOR VENDOR #				
										PILOT PILOT #				
DOCUMENTATION										FLIGHT MANAGER				
										PHONE #				
FLIGHT ITINERARY – USE MILITARY TIME ONLY														
DEPART WITH			DEPART FROM			TIME ZONE EX:MDT/MST	ENROUTE	ARRIVE TO			TIME ZONE EX: MDT/MST	DROP OFF	INFO RELAY	
DATE	NO. PAX	LBS	AIRPORT	ETD	ATD		ETE	AIRPORT	ETA	ATA		NO. PAX	LBS	TO/FROM
FLIGHT FOLLOWING - CHECK or CIRCLE ONE												NATIONAL FF 168.650 & AIR GUARD (168.625)		
AGENCY { AFF } OR {15 MINUTE CHECK-IN VIA RADIO}														
FAA { IFR } OR {VFR}														
TRAVELING WITHIN GEO AREA CALL SWCC AT EVERY FUEL STOP 1-888-440-4333										DATE:				
TRAVELING OUTSIDE GEO AREA CALL NICC FF AT EVERY FUEL STOP 1-800-994-6312										TIME:				
										BY WHOM:				

Reminder: Attach Cost Comparsion /Justicfication Forms if needed